SCHOOL/GROUP LIST
Communication Arts

District Name: _____   County/District Code: _____ - _____

School Name: _____   School Code: _____

Contact Person: _____

Email Address: _____

Phone Number: _____

GENERAL INSTRUCTIONS: Do not list more than one school's testing groups on this form. If you need additional space, this form may be photocopied.

The School/Group list is CTB's way of double-checking that we have received all your groups of answer documents. Every Group Information Sheet (GIS) completed for Communication Arts should have an entry on the lines below.

NOTE: The test material you have received is secure. You must account for 100% return of the test books to CTB when testing is complete. Please write the number of unused test books in the 'Number of Unused Test Books' column below.

Please refer to the instructions in the Examiner's Manual referencing the return of SECURE MATERIALS.

CTB Use	Teacher or Group Name Please spell teacher's name or group name exactly as bubbled on the Group Information Sheet.	Grade 3, 4, 5, 6, 7, 8, or 11	Number of Students	CTB Use Did Not Receive	Number of Unused Test Books

Organization Number: **M002007**   Testing Program: **001**   SO Number: **60801**

Organization Name: **MISSOURI SPRING**   Element Name:

SCHOOL/GROUP LIST

Science

District Name: _____ County/District Code: ____ - ____

School Name: _____ School Code: ____

Contact Person: _____

Email Address: _____

Phone Number: _____

GENERAL INSTRUCTIONS: Do not list more than one school's testing groups on this form. If you need additional space, this form may be photocopied.

The School/Group list is CTB's way of double-checking that we have received all your groups of answer documents. Every Group Information Sheet (GIS) completed for Science should have an entry on the lines below.

NOTE: The test material you have received is secure. You must account for 100% return of the test books to CTB when testing is complete. Please write the number of unused test books in the 'Number of Unused Test Books' column below.

Please refer to the instructions in the Examiner's Manual referencing the return of SECURE MATERIALS.

CTB Use	Teacher or Group Name Please spell teacher's name or group name exactly as bubbled on the Group Information Sheet.	Grade 3, 7, or 10	Number of Students	CTB Use Did Not Receive	Number of Unused Test Books

Organization Number: **M002007**   Testing Program: **002**   SO Number: **60802**

Organization Name: **MISSOURI SPRING**   Element Name:

SCHOOL/GROUP LIST

Mathematics

District Name: _____ County/District Code: _____ - _____

School Name: _____ School Code: _____

Contact Person: _____

Email Address: _____

Phone Number: _____

GENERAL INSTRUCTIONS: Do not list more than one school's testing groups on this form. If you need additional space, this form may be photocopied.

The School/Group list is CTB's way of double-checking that we have received all your groups of answer documents. Every Group Information Sheet (GIS) completed for Mathematics should have an entry on the lines below.

NOTE: The test material you have received is secure. You must account for 100% return of the test books to CTB when testing is complete. Please write the number of unused test books in the 'Number of Unused Test Books' column below.

Please refer to the instructions in the Examiner's Manual referencing the return of SECURE MATERIALS.

CTB Use	Teacher or Group Name Please spell teacher's name or group name exactly as bubbled on the Group Information Sheet.	Grade 3, 4, 5, 6, 7, 8, or 10	Number of Students	CTB Use Did Not Receive	Number of Unused Test Books

Organization Number: **M002007**   Testing Program: **003**   SO Number: **60803**

Organization Name: **MISSOURI SPRING**   Element Name:

CTB McGraw-Hill

SCHOOL/GROUP LIST
Social Studies

District Name: [ ] County/District Code: [-]

School Name: [ ] School Code: [ ]

Contact Person: _____

Email Address: _____

Phone Number: _____

GENERAL INSTRUCTIONS: Do not list more than one school's testing groups on this form. If you need additional space, this form may be photocopied.

The School/Group list is CTB's way of double-checking that we have received all your groups of answer documents. Every Group Information Sheet (GIS) completed for Social Studies should have an entry on the lines below.

NOTE: The test material you have received is secure. You must account for 100% return of the test books to CTB when testing is complete. Please write the number of unused test books in the 'Number of Unused Test Books' column below.

Please refer to the instructions in the Examiner's Manual referencing the return of SECURE MATERIALS.

CTB Use	Teacher or Group Name Please spell teacher's name or group name exactly as bubbled on the Group Information Sheet.	Grade 4, 8, or 11	Number of Students	CTB Use Did Not Receive	Number of Unused Test Books

Organization Number: **M002007**   Testing Program: **004**   SO Number: **60804**

Organization Name: **MISSOURI SPRING**   Element Name: